### Case 16-03802 Doc 1 Filed 02/08/16 Entered 02/08/16 17:02:28 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on	Kathleen		
	your government-issued picture identification (for	First name	First name	_
	example, your driver's	Susann		
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Zyrkowski		
		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years	,		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9354		

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Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
usiness names and oper Identification ers (EIN) you have in the last 8 years e trade names and business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs			
you live	9959 S. Prospect	If Debtor 2 lives at a different address:			
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
	County				
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ou are choosing istrict to file for uptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)			
	oyer Identification ers (EIN) you have n the last 8 years e trade names and business as names e you live ou are choosing istrict to file for	usiness names and over Identification ers (EIN) you have in the last 8 years  Business name(s)  Business name(s)  Business name(s)  Business name(s)  Business name(s)  EINs  Business name(s)  Business name(s)  EINs  Business name(s)  Chicago, IL 60643  Number, Street, City, State & ZIP Code  Cook  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Check one:  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason.			

Debtor 1 Kathleen Susann Zyrkowski

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Deb	tor 1	Kathleen Susann	Zyrkowsl	ki		_ C	ase number (if known)	
Par	t 2:	Tell the Court About	our Bank	ruptcy Ca	ase			
7. The chapter of the Bankruptcy Code you are choosing to file under		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	CHOC	sing to me under	☐ Chap	ter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			■ Chap	ter 13				
8.	How	you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
					y the fee in installments. If you ee in Installments (Official Form		, sign and attach the Application for Individuals to Pay	
			☐ I re	equest that is not req t applies t	at my fee be waived (You may juired to, waive your fee, and mo o your family size and you are	request this option and the request this option and the request to pay the feature of the request of the reques	only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line e in installments). If you choose this option, you must fill fficial Form 103B) and file it with your petition.	
			Out	. ше Арріі	cation to have the Chapter 7 T	illing i ee walved (Ol	inciai i omi 1035) and me it with your petition.	
9.	bank	you filed for ruptcy within the	■ No.					
la	last 8	3 years?	☐ Yes.	District		NA/II	On a second or	
				District		When	Case number	
				District District		When	Case number Case number	
				District			Case number	
10.	case filed not f you,	iny bankruptcy s pending or being by a spouse who is iling this case with or by a business aer, or by an ate?	■ No □ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.	•	ou rent your	■ No.	Go to I	line 12.			
	resid	ence?	☐ Yes.	Has yo	our landlord obtained an evictio	n judgment against y	you and do you want to stay in your residence?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About an Eviction Ju	udgment Against You (Form 101A) and file it with this	

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Deb	otor 1 Kathleen Susann	Zyrkows	ki		Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	usiness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	у	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	tate & ZIP Code	
	it to this petition.		Check	the appropriate bo	pox to describe your business:	
				Health Care Busin	siness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	xer (as defined in 11 U.S.C. § 101(6))	
				None of the above	ve	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appr deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stater operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the pro in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chap	apter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fi	ling under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	· Hazardo	us Property or An	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code	
					Hambor, Shoot, Oity, State a Zip Gode	

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Page 5 of 53 Document Kathleen Susann Zyrkowski Debtor 1 Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a ☐ I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about credit counseling before plan, if any, that you developed with the agency. any, that you developed with the agency. you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I counseling agency within the 180 days before I filed one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a choices. If you cannot do a certificate of completion. certificate of completion. so, you are not eligible to Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. I have a mental illness or a Incapacity. I have a mental illness or a mental mental deficiency that makes deficiency that makes me incapable me incapable of realizing or of realizing or making rational making rational decisions decisions about finances. about finances. Disability. My physical disability causes Disability. My physical disability causes me to me to be unable to participate be unable to participate in a briefing in a briefing in person, by in person, by phone, or through the phone, or through the internet, even after I reasonably tried internet, even after I to do so. reasonably tried to do so. Active duty. I am currently on active Active duty. I am currently on active military duty П military duty in a military in a military combat zone. combat zone. If you believe you are not required to receive a If you believe you are not required to receive a briefing briefing about credit counseling, you must file a about credit counseling, you must file a motion for waiver motion for waiver of credit counseling with the of credit counseling with the court.

court.

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Deb	tor 1 Kathleen Susann	Zyrkows	ki	Case number (if known)					
Part	6: Answer These Questi	ons for R	eporting Purposes						
	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you or	we that are not consumer debts or busines	ss debts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	7. Go to line 18.					
	Do you estimate that after any exempt	☐ Yes.		Oo you estimate that after any exempt prop will be available to distribute to unsecured					
	property is excluded and administrative expenses		□ No						
	are paid that funds will be available for		☐ Yes						
	distribution to unsecured creditors?								
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	<b>5</b> 0,001-100,000				
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000				
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	<b>\$</b> 50,0	01 - \$100,000	☐ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
	be worth?		001 - \$500,000	\$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		<b>□</b> \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	More than \$50 billion				
20.	How much do you	□ \$0 - \$50,000		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,001 - \$300 minor	More than \$50 billion				
Part	:7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
				, I am aware that I may proceed, if eligible, elief available under each chapter, and I ch					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	relief in accordance with the c	chapter of title 11, United States Code, spe	cified in this petition.				
		bankrupt 1519, an	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
		Kathlee	leen Susann Zyrkowski n Susann Zyrkowski e of Debtor 1	Signature of Debtor	72				
		Executed	February 8, 2016  MM / DD / YYYY	Executed on MM	/ DD / YYYY				

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Debtor 1 Kathleen Susann	Zyrkowski	Cas	Case number (if known)		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this peti under Chapter 7, 11, 12, or 13 of title 11, United S for which the person is eligible. I also certify that	States Code, and have			
If you are not represented by an attorney, you do not need to file this page.	342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the schedules filed with the petition is incorrect.				
	/s/ Joseph M. Olstein	Date	February 8, 2016		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Joseph M. Olstein				
	Printed name				
	Olstein Law LLC				
	Firm name				
	10450 S. Western Ave.				
	Chicago, IL 60643				
	Number, Street, City, State & ZIP Code				
	Contact phone 312-725-4132	Email address	Joseph@olsteinlaw.com		
	6300472				
	Bar number & State		<del></del>		

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Fill in this infor	mation to identify your	case:			
Debtor 1	Kathleen Susann	Zyrkowski			
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an
					amended filing

#### Official Form 106Sum

<u>S.</u>	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a	in that you rour Assets and Liabilities and Certain Statistical information is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	or supplyi	ng correct
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	85,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,396.25
	1c. Copy line 63, Total of all property on Schedule A/B	\$	86,396.25
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	125,956.60
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	19,811.51
	Your total liabilities	\$	145,768.11
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,662.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,427.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7	Yes What kind of daht da you have?		

- What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1	Kathleen	Susann	Zyrkowski
----------	----------	--------	-----------

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

340.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

			- O O G I I	1 ago 10 01 00				
Fill in this inform	mation to identify	your case and tl	nis filin	g:				
Debtor 1	Kathleen Sus	sann Zyrkowsk	(i					
	First Name	Middle	Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name				
	unkruptov Court for	tha: NORTHER	N DIST	RICT OF ILLINOIS				
United States Ba	inkrupicy Court for	ille. NORTTIEN	ו כום ויו.	RICT OF ILLINOIS				
Case number _								
							amended filing	
Official Fo	rm 106A/B							
Schedule	e A/B: Pr	operty					12/15	
In each category, se	eparately list and des	scribe items. List a		only once. If an asset fits in more than one o				
				d people are filing together, both are equally top of any additional pages, write your name				
Daniela Bassailles	Fact Basidanas Bu	::	DI	Fatata Van Ones as Hana as Interest la		` ,	, ,	
Part 1: Describe	Each Residence, Bu	liding, Land, or Otr	ier Keai	Estate You Own or Have an Interest In				
1. Do you own or h	ave any legal or equ	itable interest in ar	ny reside	nce, building, land, or similar property?				
☐ No. Go to Part	t 2.							
Yes. Where is	s the property?							
	,							
1.1			What	is the property? Check all that apply				
9959 S. Pr	rospect		Single-family home		Do not deduct se	cured claims	s or exemptions. Put the	
Street address,	Street address, if available, or other description		_	Duplex or multi-unit building	amount of any se	cured claim	s on Schedule D:	
				Condominium or cooperative	Creations who ma	Creditors Who Have Claims Secured by Prope		
			_	Manufactured or mobile home				
Chicago	IL	60643-0000		Land	Current value of entire property?		Current value of the portion you own?	
City	State	ZIP Code	ä	Investment property	\$85,00		\$85,000.00	
•					Describe the nature of your ownership int  (such as fee simple, tenancy by the entire		· · · ·	
			Who	—		a life estate), if known.		
Cook				Debtor 1 only				
County				Debtor 2 only  Debtor 1 and Debtor 2 only				
555,				At least one of the debtors and another	Check if thi		nity property	
				rinformation you wish to add about this item	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				erty identification number:				
			Deb	tor's primary Residence.				
				your entries from Part 1, including an er here			\$85,000.00	
	Your Vehicles							
Part 2: Describe	Tour venicles							
				ny vehicles, whether they are register		de any veh	icles you own that	
someone else driv	ves. If you lease a	vehicle, also repo	rt it on 3	Schedule G: Executory Contracts and Ur	nexpired Leases.			
3. Cars, vans, tro	ucks, tractors, sp	ort utility vehicle	es, moto	orcycles				
■ Ma								
■ No								
☐ Yes								

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1	Kathleen Susann 2	yrkowski	Case number (if kno	own)
		es, ATVs and other recreational vehicl personal watercraft, fishing vessels, sno		
■ No				
☐ Yes	3			
		tion you own for all of your entries fro art 2. Write that number here		=> \$0.00
	Describe Your Personal and			
Do you	own or have any legal or	equitable interest in any of the followi	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	, , , , ,	ngs niture, linens, china, kitchenware		
_	s. Describe			
7. Electi Exan	nples: Televisions and radio including cell phones	s; audio, video, stereo, and digital equipr , cameras, media players, games	nent; computers, printers, scanners; m	usic collections; electronic devices
■ Ye	s. Describe			
	Gene	ral electronics - laptop, cell phone	<b>).</b>	\$1,000.00
Exan	other collections, me	s; paintings, prints, or other artwork; boo morabilia, collectibles	ks, pictures, or other art objects; stamp	, coin, or baseball card collections;
	musical instruments	oles exercise, and other hobby equipment; b	icycles, pool tables, golf clubs, skis; cal	noes and kayaks; carpentry tools;
_	s. Describe			
■ No	mples: Pistols, rifles, shotg	uns, ammunition, and related equipment		
11. <b>Clot</b> l <i>Exa</i> □ No	mples: Everyday clothes, fu	urs, leather coats, designer wear, shoes,	accessories	
■ Ye	s. Describe			
	Cloth	ing and wearing apparel.		\$350.00
■ No	mples: Everyday jewelry, c	ostume jewelry, engagement rings, wedd	ing rings, heirloom jewelry, watches, ge	ms, gold, silver
13. <b>Non</b> <i>Exa</i> ■ No	-farm animals mples: Dogs, cats, birds, h	orses		

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De	ebtor 1	Kathleen Susann 2	Zyrkowski	Case n	umber (if known)	
14.	Any oth ■ No	ner personal and hous	ehold items you did	not already list, including any health aids yo	ou did not list	
	☐ Yes.	Give specific information	on			
15				art 3, including any entries for pages you ha	ave attached	\$1,350.00
		scribe Your Financial Asse				
Do	you ow	n or have any legal or	equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	oles: Money you have in		me, in a safe deposit box, and on hand when y	ou file your petition	
17.	Examp			ounts; certificates of deposit; shares in credit ur with the same institution, list each.	nions, brokerage hous	es, and other similar
	□ No ■ Yes			Institution name:		
		17.1		Checking account with BMO Harr	ris Bank.	\$6.25
	■ Yes		IRA with Vangua			\$40.00
19.		iblicly traded stock and	d interests in incorp	orated and unincorporated businesses, incl	uding an interest in	an LLC, partnership,
	■ No □ Yes.	Give specific information	on about themame of entity:		ownership:	
	Negotia Non-ne	able instruments include	e personal checks, car e those you cannot tra	stiable and non-negotiable instruments shiers' checks, promissory notes, and money or insfer to someone by signing or delivering them		
	<b>—</b> 103.	•	suer name:			
21.		nent or pension accou bles: Interests in IRA, ER		103(b), thrift savings accounts, or other pension	n or profit-sharing plan	s
	☐ Yes.	List each account separ Type	ately. e of account:	Institution name:		
22.	Your sl Examp		sits you have made so	that you may continue service or use from a c public utilities (electric, gas, water), telecommu		or others
	■ No □ Yes			Institution name or individual:		
	<b>—</b> 100.			institution name of individual.		
		i <b>es</b> (A contract for a peri	iodic payment of mon	ey to you, either for life or for a number of years	s)	

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De	ebtor 1	Kathleen	Susann Zyrkowski		Case number	(if known)
24.			ation IRA, in an account in 1), 529A(b), and 529(b)(1).	a qualified ABLE progran	n, or under a qualified state t	uition program.
	☐ Yes		Institution name and descrip	otion. Separately file the rec	ords of any interests.11 U.S.C	. § 521(c):
25.	Trusts, ■ No	equitable or	future interests in propert	y (other than anything list	ed in line 1), and rights or po	owers exercisable for your benefit
	☐ Yes.	Give specific	information about them			
26.			, trademarks, trade secrets domain names, websites, pro			
	☐ Yes.	Give specific	information about them			
	_Examp		es, and other general intang permits, exclusive licenses, o		lings, liquor licenses, profession	onal licenses
	■ No □ Yes.	Give specific	information about them			
Me	oney or p	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu ■ No	unds owed t	o you			
	☐ Yes. 0	Give specific	information about them, inclu	uding whether you already f	led the returns and the tax yea	ars
	■ No	les: Past due	or lump sum alimony, spous	sal support, child support, m	aintenance, divorce settlemen	t, property settlement
30.	Examp.	<i>les:</i> Unpaid w	neone owes you vages, disability insurance pa unpaid loans you made to so		sick pay, vacation pay, worke	rs' compensation, Social Security
	■ No □ Yes.	Give specific	information			
31.	Examp	ts in insuran les: Health, d		alth savings account (HSA)	; credit, homeowner's, or rente	er's insurance
	■ No □ Yes. N	Name the ins	urance company of each poli	icy and list its value.		
			Company name:		Beneficiary:	Surrender or refund value:
32.	If you a		perty that is due you from s ciary of a living trust, expect		nce policy, or are currently enti	tled to receive property because
	■ No □ Yes.	Give specific	information			
33.	Examp.		d parties, whether or not you		made a demand for payment ue	
	■ No □ Yes.	Describe eac	ch claim			
				very nature, including co	unterclaims of the debtor and	d rights to set off claims
	■ No		-	· · · · · · · · · · · · · · · · · · ·		
	⊔ Yes.	Describe ead	ch claim			

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Debtor	1 Kathleen Susann Zyrkowski		Case number (if known)	
	financial assets you did not already list			
■ No	o es. Give specific information			
<b>□</b> 16	es. Give specific information			
	ld the dollar value of all of your entries from Part 4, includin Part 4. Write that number here			\$46.25
Part 5:	Describe Any Business-Related Property You Own or Have an Interes	st In. List any real estate	e in Part 1.	
37. <b>Do yo</b>	ou own or have any legal or equitable interest in any business-related	property?		
■ No.	Go to Part 6.			
☐ Yes	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Clf you own or have an interest in farmland, list it in Part 1.	Own or Have an Interest	ln.	
46. <b>Do</b> y	you own or have any legal or equitable interest in any farm-	or commercial fishi	ng-related property?	
<b>■</b> 1	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	you have other property of any kind you did not already list?	?		
	amples: Season tickets, country club membership			
■ No	o es. Give specific information			
54. <b>Ad</b>	ld the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b>	rt 1: Total real estate, line 2			\$85,000.00
56. <b>Pa</b>	rt 2: Total vehicles, line 5	\$0.00		
57. <b>Pa</b>	rt 3: Total personal and household items, line 15	\$1,350.00		
58. <b>Pa</b>	rt 4: Total financial assets, line 36	\$46.25		
59. <b>Pa</b>	rt 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b>	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b>	rt 7: Total other property not listed, line 54	\$0.00		
62. <b>To</b>	tal personal property. Add lines 56 through 61	\$1,396.25	Copy personal property total	\$1,396.25
63. <b>To</b>	tal of all property on Schedule A/B. Add line 55 + line 62			\$86,396.25

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this information to identify your case:									
Debtor 1									
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS						
Case number									
(if known)					Check if this is an amended filing				

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	dentify the	Property You	u Claim as	Exempt
---------	-------------	--------------	------------	--------

1. \	Which set of exemptions are	you claiming? (	Check one only, e	ven if your s	pouse is filing	with you.
------	-----------------------------	-----------------	-------------------	---------------	-----------------	-----------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Ched	ck only one box for each exemption.	
\$85,000.00		\$15,000.00	735 ILCS 5/12-901
	Ц	100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$350.00		\$350.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$6.25		\$6.25	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$40.00		\$40.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$1,000.00 \$350.00 \$6.25	\$1,000.00	\$85,000.00  \$15,000.00  \$100% of fair market value, up to any applicable statutory limit  \$350.00  \$100% of fair market value, up to any applicable statutory limit  \$350.00  \$100% of fair market value, up to any applicable statutory limit  \$350.00  \$100% of fair market value, up to any applicable statutory limit  \$40.00  \$40.00  \$40.00

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Del	btor 1	Kathleen Susann Zyrkowski	Case number (if known)
3.	-	you claiming a homestead exemption of more than \$155,675? oject to adjustment on 4/01/16 and every 3 years after that for cases filed on	or after the date of adjustment.)
		No	
		Yes. Did you acquire the property covered by the exemption within 1,215 da	ays before you filed this case?
		□ No	
		☐ Yes	

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		•			
Fill in this informa	ation to identify you	ur case:			
Debtor 1	Kathlaan Susar	on Zyrkowski			
Deptor I	Kathleen Susar	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name		•	
United States Bank	kruptcy Court for the	: NORTHERN DISTRICT OF ILLINOIS			
Office States Baris	traptoy Court for the	THE REPORT OF TELEMONE			
Case number					
(if known)					if this is an
				ameno	ded filing
Official Form	106D				
		M/le a l l avez Oladou Caraca	. I		
Schedule L	): Creditors	Who Have Claims Secured	by Propert	У	12/15
Be as complete and a	ccurate as possible. I	f two married people are filing together, both are equa	lly responsible for sup	plying correct information	on. If more space is
needed, copy the Add known).	litional Page, fill it out	, number the entries, and attach it to this form. On the	top of any additional p	ages, write your name a	nd case number (if
•	ave eleime cooured by	VACUE Proporty?			
1. Do any creditors ha	-		ou hava nathina alaa	to renert on this form	
_		this form to the court with your other schedules. You	ou nave nothing eise	to report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
		nore than one secured claim, list the creditor separately fo		Column B	Column C
		particular claim, list the other creditors in Part 2. As much ler according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
as possible, list the old	aims in aiphabelicaí ord	let according to the creditor's name.	value of collateral.	claim	If any
2.1 Chase Mtg		Describe the property that secures the claim:	\$102,581.60	\$85,000.00	\$17,581.60
Creditor's Name		9959 S. Prospect Chicago, IL 60643			
		Cook County Debtor's primary Residence.			
De Dev 040	200	As of the date you file, the claim is: Check all that			
Po Box 246 Columbus,		apply.			
		☐ Contingent			
Number, Street, C	City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only		car loan)			
Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit			
☐ Check if this clair	m relates to a	Other (including a right to offset)			
community debt					
	Opened				
	3/13/13				
	Last Active				
Date debt was incurr	red 11/16/15	Last 4 digits of account number 0865			
	National Ban	Describe the property that secures the claim:	\$23,375.00	\$85,000.00	\$23,375.00
Creditor's Name		9959 S. Prospect Chicago, IL 60643			
		Cook County Debtor's primary Residence.			
6316 S Wes	starm Ava	As of the date you file, the claim is: Check all that			
Chicago, IL		apply.			
	City, State & Zip Code	Contingent			
indifficer, Street, C	ny, state a zip code	☐ Unliquidated ☐ Disputed			
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or secu	red		
☐ Debtor 2 only		car loan)			
Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	•	☐ Judgment lien from a lawsuit			

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Debtor 1 Kathlee	hleen Susann Zyrkowski			number (if know)	
First Name	Middle N	Name Last Name			
☐ Check if this clain community debt	relates to a	☐ Other (including a right to offset)			
Date debt was incurre	Opened 2/01/12 Last Active 8/21/15	Last 4 digits of account nu	mber <u>3309</u>		
If this is the last pag Write that number h	ge of your form, add lere:	olumn A on this page. Write that nur the dollar value totals from all pages or a Debt That You Already Liste		\$125,956.60 \$125,956.60	
to collect from you fo	r a debt you owe to see debts that you listed	someone else, list the creditor in Par	t 1, and then list the co	r listed in Part 1. For example, if a coll illection agency here. Similarly, if you ave additional persons to be notified f	have more than one
Name Addre	ess			Part 1 did you enter the credi	tor?
			Last 4 digits of a	ccount number	

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Fill	in this informa	tion to identify your	case:						
Deb	otor 1	Kathleen Susann	Zyrkows	ki					
	-	First Name		le Name	Last Name				
	otor 2 use if, filing)	First Name	Midd	le Name	Last Name				
` '									
Unit	ted States Banki	ruptcy Court for the:	NORTHE	ERN DISTRICT OF ILL	INOIS				
	se number							Check i	f this is an ed filing
Off	icial Form	106F/F							
			/ho Hav	ve Unsecured	Claims				12/15
any e Sche D: Cr the C numl	executory contracedule G: Executory reditors Who Have Continuation Page ber (if known).	ts or unexpired leases y Contracts and Unexpi e Claims Secured by Pr	that could re ired Leases operty. If mo re no informa	creditors with PRIORITY esult in a claim. Also list (Official Form 106G). Do ore space is needed, copation to report in a Part,	t executory contracts not include any cred by the Part you need,	on Schedule A/B: Pro litors with partially sec fill it out, number the	pperty (Offic cured claims entries in th	ial Form 1 that are l e boxes o	06A/B) and on listed in Schedule on the left. Attach
		have priority unsecured							
	☐ No. Go to Part	2.							
	Yes.								
	identify what type of possible, list the cl	of claim it is. If a claim ha aims in alphabetical orde	s both priority or according t	has more than one priority y and nonpriority amounts to the creditor's name. If ye the other creditors in Part	i, list that claim here and ou have more than two	nd show both priority and	d nonpriority	amounts.	As much as
	(For an explanation	n of each type of claim, s	ee the instru	ctions for this form in the i	nstruction booklet.)	Total claim	Priority		Nonpriority
	٦					Total claim	amount		amount
2.1	Illinois De	partment of Reve	nue	Last 4 digits of accoun	t number	\$0.00	<del>.</del>	\$0.00	\$0.00
	PO Box 5			When was the debt inc	eurred?		-		
	Number Stree	et City State Zlp Code		As of the date you file,	the claim is: Check a	III that apply			
	Who incurred th	e debt? Check one.		☐ Contingent					
	■ Debtor 1 only			☐ Unliquidated					
	Debtor 2 only			☐ Disputed					
	Debtor 1 and	Debtor 2 only		Type of PRIORITY unse	ecured claim:				
	☐ At least one of	of the debtors and another	er	☐ Domestic support ob	ligations				
	☐ Check if this	claim is for a commun	nity debt	Taxes and certain ot	her debts you owe the	government			
	Is the claim sub	ject to offset?		☐ Claims for death or p	personal injury while yo	u were intoxicated			
	■ No			Other. Specify					
	☐ Yes			No	tice purposes o	nly			
2.2	Internal R	evenue Service		Last 4 digits of accoun	t number	\$0.00		\$0.00	\$0.00
	Priority Credit PO Box 73		<u> </u>	When was the debt inc	eurred?		-	<u> </u>	<u> </u>
		et City State Zlp Code	<u> </u>	As of the date you file,	the claim is: Check a	Ill that apply			
	Who incurred th	e debt? Check one.		☐ Contingent					
	Debtor 1 only			☐ Unliquidated					
	Debtor 2 only			☐ Disputed					
	Debtor 1 and	Debtor 2 only		Type of PRIORITY unse	ecured claim:				
	☐ At least one of	of the debtors and anothe	er	☐ Domestic support ob	ligations				
	☐ Check if this	claim is for a commur	nity debt	■ Taxes and certain ot	her debts you owe the	government			
	Is the claim sub		-	Claims for death or p		-			
	No			Other. Specify					
	☐ Yes			No	tice purposes o	nly			

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Debto	r 1 Kathleen Susann Zyrkowski	Case number (if know)						
Part 2	List All of Your NONPRIORITY Unsecure	ed Claims						
3. Do	any creditors have nonpriority unsecured claims a	gainst you?						
	No. You have nothing to report in this part. Submit this	form to the court with your other schedules.						
	Yes.							
cla	im, list the creditor separately for each claim. For each	shabetical order of the creditor who holds each claim. If a creditor has more than claim listed, identify what type of claim it is. Do not list claims already included in Part	1. If more than one					
cre	editor holds a particular claim, list the other creditors in I	Part 3.If you have more than three nonpriority unsecured claims fill out the Continuatio	n Page of Part 2.  Total claim					
44	Advances Christ Madical Conton	Last A divide of account number 7044						
4.1	Advocate Christ Medical Center Nonpriority Creditor's Name	Last 4 digits of account number 7644	\$1,260.00					
	PO Box 3039	When was the debt incurred?						
	Oak Brook, IL 60522-3039  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.	_						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:						
	☐ At least one of the debtors and another	☐ Student loans						
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical Bill						
4.2	Advocate Medical Group	Last 4 digits of account number 0209	\$93.49					
	Nonpriority Creditor's Name 8550 W. Bryn Mawr Ave.	When was the debt incurred?						
	8th Floor	when was the destiniculted:						
	Chicago, IL 60631							
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans						
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Medical Bill						

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Debtor 1 Kathleen Susann Zyrkowski						
4.3	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	8514	\$6,041.00		
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	When was the debt incurred?  Opened 10/01/00 Last Active 4/02/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans	l claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.4	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	1982	\$10,947.00		
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 2/01/00 Last Active 5/01/15			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:			
	☐ At least one of the debtors and another	Student loans	i Claiii.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	I			
4.5	Consultants in Lab Medicine Nonpriority Creditor's Name	Last 4 digits of account number	2198	\$8.08		
	PO Box 5981 Carol Stream, IL 60197-5981	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:			
	☐ At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Medical Bil	<u> </u>			

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Debto	Kathleen Susann Zyrkowski	Case number (if know)	
4.6	Evergreen Orthopedic, S.C.  Nonpriority Creditor's Name	Last 4 digits of account number 2439	\$36.69
	2800 W 87th Chicago, IL 60652-3831 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
4.7	Falls Collection Svc Nonpriority Creditor's Name	Last 4 digits of account number 1748	\$281.00
	Po Box 668 Germantown, WI 53022	When was the debt incurred? Opened 4/01/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Collection Attorney Acl Inc.	
4.8	LCMH-Affiliated Services  Nonpriority Creditor's Name	Last 4 digits of account number 6982	\$65.82
	2800 W 87th Street Chicago, IL 60652-3831  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset?	When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bill	

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Debtor	1 Kathleen Susann Zyrkowski	Case number (if know)	
4.9	LCMH-Affiliated Services	Last 4 digits of account number	\$22.83
	Nonpriority Creditor's Name 2800 W. 87th Street Chicago, IL 60652	When was the debt incurred?	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Medical Bill	-
4.10	Little Company of Mary	Last 4 digits of account number 2576	\$115.09
	Nonpriority Creditor's Name 2800 West 95th Street Evergroop Bork II 60805	When was the debt incurred?	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	По и	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bill	-
4.11	Little Company of Mary	Last 4 digits of account number 6672	\$189.73
	Nonpriority Creditor's Name 2800 West 95th Street Evergreen Park, IL 60805	When was the debt incurred?	-
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify Medical Bill	
			-

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Debtor	1 Kathleen Susann Zyrkowski	Case number (if know)				
4.12	Merchant Credit Guide Nonpriority Creditor's Name	Last 4 digits of account number 6672	\$0.00			
	223 W. Jackson Blvd #700	When was the debt incurred? 9/25/2015				
	Chicago, IL 60606  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Notice purposes only				
4.13	Midwest Anesthesiologists Nonpriority Creditor's Name	Last 4 digits of account number 4100	\$100.33			
	3407 Momentum Place Chicago, IL 60689-5334	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Medical Bill				
4.14	Southwest Orthopedics, S.C.	Last 4 digits of account number 4472	\$496.93			
	Nonpriority Creditor's Name 9618 Southwest Highway Oak Lawn, IL 60453-2862	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Medical Bills				

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Debtor	1 Kathleen	Susann Zyrkowski		Case r	number (if know)			
4.15	Stanley Pol		Last 4 digits of account number			\$96.2	23	
	2800 W. 87		When was the debt incurred?					
	Chicago, IL							
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply			
	■ Debtor 1 on		☐ Contingent					
		•	☐ Unliquidated					
	☐ Debtor 2 on	· ·	☐ Disputed					
	Debtor 1 an		Type of NONPRIORITY unsecure	ed claim:				
		of the debtors and another	Student loans					
		is claim is for a community debt bject to offset?	☐ Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did	d not		
	■ No		Debts to pension or profit-shari	ng plans, a	and other similar debts			
	☐ Yes		Other. Specify Medical B	ill				
4.16		Equipment	Last 4 digits of account number	8194	<u>,                                      </u>	\$57.2	 29_	
	PO Box 72	180	When was the debt incurred?					
	Roselle, IL Number Street	City State Zlp Code	As of the date you file, the claim	is: Check	all that apply			
		the debt? Check one.	_					
	Debtor 1 on	ly	Contingent					
	Debtor 2 on	ly	☐ Unliquidated					
	Debtor 1 an	d Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:					
		of the debtors and another	Student loans					
		is claim is for a community debt	☐ Obligations arising out of a sep	aration an	reement or divorce that you div	d not		
		bject to offset?	report as priority claims	aration ag	reement of divorce that you dit	31100		
	■ No		Debts to pension or profit-shari	ng plans, a	and other similar debts			
	Yes		Other. Specify Medical B	ill				
Part 3:	List Other	s to Be Notified About a Debt 1	Γhat You Already Listed					
trying more t	to collect from	you have others to be notified about you for a debt you owe to someone or for any of the debts that you liste or 2, do not fill out or submit this pa	e else, list the original creditor in P d in Parts 1 or 2, list the additional	arts 1 or 2	, then list the collection ager	ncy here. Similarly, if you have	е	
Name ar	nd Address	On	which entry in Part 1 or Part 2 did yo	u list the o	riginal creditor?			
	Services				Creditors with Priority Unsecur			
	larry S. Trui Charles. MC	) 63301-4047		Part 2:	Creditors with Nonpriority Unse	ecured Claims		
			t 4 digits of account number					
Part 4:	Add the A	mounts for Each Type of Unse	cured Claim					
		certain types of unsecured claims.		eporting p	ourposes only. 28 U.S.C. §159	9. Add the amounts for each ty	ype	
					Total claim			
	6a.	Domestic support obligations		6a.	\$	0.00		
Total cla		Tayon and partain other debts vo	u owo the government	6h	•			
HOIH P	art 1 6b. 6c.	Taxes and certain other debts yo Claims for death or personal inju	<del>-</del>	6b. 6c.	\$ 	0.00 0.00		
	6d.			6d.	\$	0.00		
	6e.	Total. Add lines 6a through 6d.		6e.	\$	0.00		
					Total Claim			
	6f.	Student loans		6f.	Total Claim \$	0.00		
Total cla		Obligations suicing out of a con-	ration agreement discours (I of					
from P	<b>art 2</b> 6g.	did not report as priority claims	ration agreement or divorce that yo	6g.	\$	0.00		
	6h.	Debts to pension or profit-sharing	g plans, and other similar debts	6h.	\$	0.00		

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Debtor 1	Kathleen Susann Zyrkowski		Case nu	umber (if know)		
	6i.	Other. Add all other nonpriority unsecured claims. Write that amo	ount here. 6i.	\$	19,811.51	
	6j.	Total. Add lines 6f through 6i.	6j.	\$	19,811.51	

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Fill in this infor					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number				_ ~	1.16.11.1
(if known)					neck if this is an nended filing

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>-</del>

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			-		•
Fill in this	information to identify yo	our case:			
Debtor 1	Kathleen Susa	nn Zyrkowski			
<b>D</b> 10	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
		e: NORTHERN DISTRICT	OFILLINOIS		
United Sta	tes Bankruptcy Court for the	e. NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ber				
(if known)					Check if this is an
					amended filing
Official	l Form 106H				
Sched	lule H: Your Co	dehtors			12/15
<del></del>	1010 111 1 0 0 1 0 0	- GODIOI G			12/13
your name	and case number (if know	the boxes on the left. Attact wn). Answer every question (If you are filing a joint case,			op of any Additional Pages, write
1. 50	you have any codebiors:	(ii you are filling a joint case,	do not list ettrei spous	e as a codebior.	
■ No					
☐ Yes	3				
		you lived in a community pana, Nevada, New Mexico, Pu			erty states and territories include
, (1)2011	a, Camorria, Idario, Eduloia	ina, riovada, riov monios, rio	iorio riioo, roxao, rraoi	migron, and whosehen	,
	Go to line 3.				
☐ Yes	s. Did your spouse, former s	spouse, or legal equivalent liv	e with you at the time?		
in line Form fill out	e 2 again as a codebtor on 106D), Schedule E/F (Offic t Column 2.	lly if that person is a guarar	ntor or cosigner. Make	sure you have listed 06G). Use Schedule I	ing with you. List the person show the creditor on Schedule D (Officia D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State an	nd ZIP Code		Column 2: The co	reditor to whom you owe the debt les that apply:
0.4				Под не	
3.1	Name			□ Schedule D, li □ Schedule E/F,	
				☐ Schedule G, li	
_	Ni washari Ctraat				
	Number Street City	State	ZIP Code		
3.2				Cobodulo D II	
	Name			□ Schedule D, li □ Schedule E/F,	
				☐ Schedule G, li	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your o	ase:						
		ısann Zyrkowski						
1 -	otor 2							
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
(If kr	se number						d filing ent showing	g postpetition chapter ollowing date:
	fficial Form 106l					MM / DD/ Y	YYY	
	chedule I: Your Inc							12/
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment Fill in your employment	ır spouse is not filing w	ith you, do not includ onal pages, write you	e inform	ation a	bout your speenumber (if	ouse. If mo known). A	ore space is needed answer every question
••	information.		Debtor 1					ling spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			☐ Emplo	•	
	employers.	Occupation	Retired					
	Include part-time, seasonal, or self-employed work.	Employer's name						
	Occupation may include student or homemaker, if it applies.	Employer's address						
		How long employed to	here?					
Pai	t 2: Give Details About Mo	nthly Income						
	mate monthly income as of the cuse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for a	ıy line,	write \$0 in the	space. Inc	clude your non-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	for all en	ployers	s for that perso	on on the li	nes below. If you nee
					For	Debtor 1		otor 2 or ng spouse
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A
3.	Estimate and list monthly over	ime pav.		3. +	\$	0.00	+\$	N/A

0.00

N/A

4. Calculate gross Income. Add line 2 + line 3.

Debt	tor 1	Kathleen Susann Zyrkowski	_	Case	number (if known)			
				For	Debtor 1	For Debto		
	Cop	by line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	* \$_	0.00	+ \$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. 8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  2nd Job accounting with Beverly Other monthly income. Specify: Bakery  LINK  3rd Job with Noble BBDS	8c. 8d. 8e. ce	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 1,022.00 0.00 0.00 150.00 1,300.00	\$ \$ \$ \$ + \$ \$	N/A N/A N/A N/A N/A N/A	
		Old COD With Nobic BBBC	_ ,		1,000.00			7
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,662.00	\$	N/A	<u>\</u>
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	:	2,662.00 + \$	N/A	= \$	2,662.00
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in <i>Schedul</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no cify:	ır depen		•	ted in <i>Schedu</i>	ule J. - +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certilies					Combin	2,662.00 ned y income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	n?					,

Official Form 106I Schedule I: Your Income page 2

Yes. Explain:

Fill	in this information to identify your case:							
Deb	otor 1 Kathleen Susann Zyrkowski		Check if this is:					
1	otor 2		<ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chapter</li> <li>13 expenses as of the following date:</li> </ul>					
(Spc	ouse, if filing)			13 expenses as of t	the following date:			
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			MM / DD / YYYY				
	se numbernown)							
Of	fficial Form 106J							
So	chedule J: Your Expenses				12/15			
info	as complete and accurate as possible. If two married people are filing to ormation. If more space is needed, attach another sheet to this form. On mber (if known). Answer every question.							
Par 1.	tt 1: Describe Your Household Is this a joint case?							
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?							
	□ No							
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Sepa	rate Household	of De	ebtor 2.				
2.	Do you have dependents? ■ No							
		lent's relationship 1 or Debtor 2	to	Dependent's age	Does dependent live with you?			
	Do not state the				□ No			
	dependents names.				☐ Yes ☐ No			
					☐ Yes			
					□ No			
					Yes			
					□ No			
3.	Do your expenses include				☐ Yes			
J.	expenses of people other than yourself and your dependents?							
Par								
exp	timate your expenses as of your bankruptcy filing date unless you are us benses as of a date after the bankruptcy is filed. If this is a supplemental plicable date.							
	lude expenses paid for with non-cash government assistance if you kno value of such assistance and have included it on Schedule I: Your Inco.							
	ficial Form 106l.)			Your expe	enses			
4.	The rental or home ownership expenses for your residence. Include first payments and any rent for the ground or lot.	st mortgage	4.	\$	997.00			
	If not included in line 4:							
	4a. Real estate taxes		4a.	· ———	0.00			
	4b. Property, homeowner's, or renter's insurance			\$	0.00			
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. 4d.	\$ \$	0.00 0.00			
5.	Additional mortgage payments for your residence, such as home equity		5.	·	0.00			

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Debtor	r 1 Kathleen	Susann Zyrkowski	Case num	ber (if known)	
	  Lilition				
-	<b>Itilities:</b> a. Electricity,	heat, natural gas	6a.	¢	220.00
	•	ver, garbage collection	6b.	·	60.00
_		, cell phone, Internet, satellite, and cable services	6c.		180.00
	d. Other. Spe		6d.		0.00
_		ekeeping supplies	ou.	·	
				·	385.00
_		hildren's education costs	8.	\$	0.00
	-	ry, and dry cleaning	9.	\$	75.00
	•	roducts and services	10.	\$	80.00
	ledical and de		11.	\$	200.00
	ransportation. To not include ca	Include gas, maintenance, bus or train fare.	12.	\$	230.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
		ributions and religious donations	14.	·	0.00
	nsurance.	ibutions and religious donations	1-7.	Ψ	0.00
-		surance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura	, , ,	15a.	\$	0.00
	5b. Health ins		15b.		0.00
	5c. Vehicle ins		15b.	*	0.00
			15d.	·	
	5d. Other insu			Ψ	0.00
	axes. Do not in specify:	clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
		ease payments: ents for Vehicle 1	17a.	¢	0.00
	, ,			·	0.00
		ents for Vehicle 2	17b.		0.00
	7c. Other. Spe		17c.	·	0.00
	7d. Other. Spe		17d.	\$	0.00
		of alimony, maintenance, and support that you did not report your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106		\$	0.00
		you make to support others who do not live with you.	1).	\$	0.00
	specify:	you make to support official who do not live with you.	19.	Ψ	0.00
		erty expenses not included in lines 4 or 5 of this form or on So		our Income	
		on other property	20a.		0.00
	0b. Real estat		20b.		0.00
		nomeowner's, or renter's insurance	20c.		0.00
			20d. 20d.	·	
		ce, repair, and upkeep expenses		·	0.00
		er's association or condominium dues	20e.	*	0.00
1. <b>O</b>	Other: Specify:		21.	+\$	0.00
2. <b>C</b>	alculate vour i	nonthly expenses			
	2a. Add lines 4	•		\$	2,427.00
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	2,721.00
			_	·	0.407.00
2	2c. Add line 22	a and 22b. The result is your monthly expenses.		\$	2,427.00
	•	nonthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.		2,662.00
2	3b. Copy your	monthly expenses from line 22c above.	23b.	-\$	2,427.00
2:	3c. Subtract v	our monthly expenses from your monthly income.			
_		is your monthly net income.	23c.	\$	235.00
Fo m	or example, do yo nodification to the	in increase or decrease in your expenses within the year after u expect to finish paying for your car loan within the year or do you expect you erms of your mortgage?			decrease because of a
	No.				
	☐ Yes.	Explain here:			

Fill in this inforn	nation to identify your	case:			
Debtor 1	Kathleen Susann		Last Name		_
Dobtor 2	First Name	Middle Name	Last Name	•	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	9	_
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		_
Case number					☐ Check if this is an amended filing
Official Form	-	ın Individual	Debtor'	s Schadulas	
Deciarat	ion About a	iii iiiuiviuuai	Debioi	5 Scriedules	12/15
You must file this obtaining money	s form whenever you f	n connection with a bar	es or amended so	chedules. Making a fals	on. se statement, concealing property, or 250,000, or imprisonment for up to 20
Sign	Below				
	or agree to pay some	eone who is NOT an atto	orney to help you	fill out bankruptcy forr	ms?
■ No					
☐ Yes. N	lame of person				h Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sur	mmary and schee	dules filed with this dec	claration and
X /s/ Kath	nleen Susann Zyrko	wski	x		
Kathlee	en Susann Zyrkows e of Debtor 1		Sign	nature of Debtor 2	

Date February 8, 2016

Fill ir	n this info	mation to identify yo	ur case:						
Debto	or 1	Kathleen Susar	nn Zyrkowski						
		First Name	Middle Na	ame	Last Name				
Debto (Spous	or 2 se if, filing)	First Name	Middle Na	ame	Last Name				
Unite	d States B	ankruptcy Court for the	: NORTHERN	I DISTRICT OF	ILLINOIS				
Cono	numbor		-						
(if knov	number <sub>vn)</sub>			_			Check if this is an		
							amended filing		
Ott:	oial Ea	rm 107							
		orm 107	Affaire fo	r Individu	ale Eiling for B	ankruntov	40/4		
					als Filing for B		12/1		
inforn	nation. If		d, attach a separ			e equally responsible for su ny additional pages, write y			
Part		Details About Your M		d Where You Li	ived Before				
		ur current marital stat		u Where Tou L	ived Belole				
	_	ar carrent maritar star	.uo:						
	☐ Marrie								
	Not ma	arried							
2. [	During the last 3 years, have you lived anywhere other than where you live now?								
	No								
	☐ Yes. L	es. List all of the places you lived in the last 3 years. Do not include where you live now.							
1	Debtor 1 P	rior Address:		tes Debtor 1 ed there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there		
						nity property state or territo Rico, Texas, Washington and			
	No								
	☐ Yes. M	lake sure you fill out So	chedule H: Your	Codebtors (Offic	ial Form 106H).				
Part 2	2 Expla	ain the Sources of Yo	ur Income						
F	ill in the to	tal amount of income y	ou received from	all jobs and all	a business during this y businesses, including par ogether, list it only once u		endar years?		
	□ No								
	Yes. F	ill in the details.							
			Debtor 1			Debtor 2			
			Sources of in Check all that	apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		ar year before that: ecember 31, 2014)	■ Wages, conbonuses, tips		\$9,281.00	☐ Wages, commissions, bonuses, tips	,		
			☐ Operating a	a husingse		☐ Operating a business			
			- Operating a	2 203111699					

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Debtor 1	Debtor 1 Kathleen Susann Zyrkowski Car					ase number (if known)			
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross in (before dexclusion	deductions and	Sources of inco		Gross income (before deductions and exclusions)
For the o		lar year: December	31, 2013 )	■ Wages, commissions, bonuses, tips		\$12,375.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a l	ousiness	
For the o		lar year: December	31, 2012 )	■ Wages, commissions, bonuses, tips		\$22,959.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a l	ousiness	
For the o		lar year: December	31, 2011 )	■ Wages, commissions, bonuses, tips		\$21,811.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a l	ousiness	
_	No Yes.	Fill in the de	etails.	Debtor 1 Sources of income Describe below	Gross in	ncome deductions and	Debtor 2 Sources of inco		Gross income (before deductions
				Describe below	exclusio		Describe below.		and exclusions)
Part 3:	List	Certain Pa	ıyments You	Made Before You Filed for	Bankruptc	у			
_	either No.	Neither De individual p	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below 6	's debts primarily consumer Debtor 2 has primarily consumer personal, family, or househouse you filed for bankruptcy, directly creditor to whom you paieditor. Do not include paymer	umer debts old purpose. id you pay a id a total of	" any creditor a tota \$6,225* or more	I of \$6,225* or mo	re? vments and	the total amount you
		* Subject	not include	payments to an attorney for the ton 4/01/16 and every 3 year	his bankrup	tcy case.			
•	Yes.			or both have primarily consure you filed for bankruptcy, di			ıl of \$600 or more?		
		■ No.	Go to line 7	<b>7.</b>					
		☐ Yes	include pay	each creditor to whom you pai rments for domestic support o for this bankruptcy case.					
Cre	ditor's	s Name and	d Address	Dates of payme	ent -	Fotal amount	Amount you	Was this	payment for

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De	btor 1 Kathle	een Susann Zyrkowski	Case number (if known)								
7.	Insiders included corporations of	before you filed for bankrupto le your relatives; any general pa f which you are an officer, direct for a business you operate as a imony.	rtners; relatives of any gen or, person in control, or ov	neral partners; partners of 20% or more	erships of which ye of their voting se	ou are a gener curities; and ar	al partner; ny managing agent,				
	■ No □ Yes. List	all payments to an insider									
	Insider's Nar	ne and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.										
	■ No										
		all payments to an insider ne and Address	Dates of payment	Total amount	Amount you	Reason for	this payment				
				paid	still owe	Include cred	itor's name				
Pai	rt 4: Identify	Legal Actions, Repossession	s, and Foreclosures								
9.	List all such m modifications,	before you filed for bankrupto atters, including personal injury and contract disputes. n the details.									
	Case title Case numbe	r	Nature of the case	Court or agency		Status of the case					
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.										
	☐ Yes. Fill i	n the information below.									
	Creditor Nan	ne and Address	Describe the Property		Date		Value of the property				
			Explain what happened	d							
11.	accounts or r	s before you filed for bankrup efuse to make a payment beca n the details.		luding a bank or fi	nancial institutio	n, set off any	amounts from your				
		ne and Address	Describe the action the	creditor took	Date take	action was	Amount				
12.		before you filed for bankrupto led receiver, a custodian, or a		erty in the possess	sion of an assign	ee for the ben	efit of creditors, a				
	■ No □ Yes										
Pa	rt 5: List Ce	rtain Gifts and Contributions									
13.	■ No	s before you filed for bankrup	tcy, did you give any gift	s with a total value	e of more than \$6	00 per person	?				
		n the details for each gift. otal value of more than \$600		Date the g	es you gave Valu gifts						
	Person to Whom You Gave the Gift and Address:										

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Del	otor 1 Kathleen Susann Zyrkowski		Ca	ase number (	if known)		
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity						
	■ No						
	☐ Yes. Fill in the details for each gift or o	ontribu	tion.				
	Gifts or contributions to charities that	total	Describe what you contributed		Dates you	Value	
	more than \$600 Charity's Name				contributed		
	Address (Number, Street, City, State and ZIP Code	<b>e</b> )					
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankru disaster, or gambling?	ptcy o	r since you filed for bankruptcy, did yo	ou lose anyt	hing because of the	ft, fire, other	
	■ No						
	Yes. Fill in the details.						
	Describe the property you lost and	Descr	ibe any insurance coverage for the lo	ss	Date of your	Value of property	
	how the loss occurred		e the amount that insurance has paid. Li		loss	lost	
		pendir	ng insurance claims on line 33 of Schedu				
		Prope	rty.				
Par	t 7: List Certain Payments or Transfers	5					
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid		Description and value of any prope	rtv	Date payment	Amount of	
	Address		transferred	ity	or transfer was	payment	
	Email or website address Person Who Made the Payment, if Not Y	<b>/</b> 011			made		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.						
	No Superior in the state of the						
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment	
18.	<ul> <li>18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than prop transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>						
	Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was	
	Address		property transferred		received or debts	made	
	Person's relationship to you						
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset			lf-settled tru	ıst or similar device	of which you are a	
	■ No □ Yes. Fill in the details.						
	Name of trust		Description and value of the proper	rty transferr	ed	Date Transfer was	
			_ 300piio and value of the proper	,		made	

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Debtor 1 Kathleen Susann Zyrkowski

Case number (if known)

Par	18: List of Certain Financial Accounts, I	nstruments, Safe Depos	it Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.					
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
	Do you now have, or did you have within cash, or other valuables?	I year before you filed fo	r bankruptcy, an	y safe deposit box or other depo	sitory for securities,	
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit	t or place other than you	r home within 1	year before you filed for bankrup	tcy	
	■ No					
	Yes. Fill in the details.	W// las bas an		Describe the contents	D	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	·			Do you still have it?	
Par	19: Identify Property You Hold or Contro	ol for Someone Else				
23.	Do you hold or control any property that s for someone.	omeone else owns? Incl	ude any propert	y you borrowed from, are storing	for, or hold in trust	
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, S Code)		Describe the property	Value	
Par	10: Give Details About Environmental Ir	formation				
For	the purpose of Part 10, the following defini	tions apply:				
	Environmental law means any federal, sta toxic substances, wastes, or material into regulations controlling the cleanup of the	the air, land, soil, surface	e water, ground	•		
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.					
	Hazardous material means anything an en hazardous material, pollutant, contaminar		as a hazardous	waste, hazardous substance, to	kic substance,	
Rep	ort all notices, releases, and proceedings t	hat you know about, reg	ardless of when	they occurred.		
24.	Has any governmental unit notified you th	at you may be liable or p	otentially liable	under or in violation of an enviro	onmental law?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental ur Address (Number, S ZIP Code)		Environmental law, if you know it	Date of notice	

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Deb	otor 1	Kathleen Susann Zyrkowski	ki	Case number (if known)				
25.	Have	e you notified any governmental u	unit of any release of hazardous material?					
	_		·					
		No Yes. Fill in the details.						
	— Nar	ne of site	Governmental unit	Environmental law, if you	Date of notice			
	Add	dress (Number, Street, City, State and ZIP C	Code) Address (Number, Street, City, State and ZIP Code)	know it				
26.	Hav	e you been a party in any judicial o	or administrative proceeding under any envir	onmental law? Include settlements	s and orders.			
		No						
		Yes. Fill in the details.						
		se Title		Nature of the case	Status of the			
	Cas	se Number	Name Address (Number, Street, City,		case			
			State and ZIP Code)					
Par	t 11:	Give Details About Your Busine	ess or Connections to Any Business					
27.	With	nin 4 years before you filed for bar	ankruptcy, did you own a business or have any	y of the following connections to a	ny business?			
		☐ A sole proprietor or self-emplo	loyed in a trade, profession, or other activity,	either full-time or part-time				
		☐ A member of a limited liability	y company (LLC) or limited liability partnershi	p (LLP)				
		☐ A partner in a partnership						
		☐ An officer, director, or managi	ging executive of a corporation					
		☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.							
		☐ Yes. Check all that apply above and fill in the details below for each business.  Business Name  Describe the nature of the business  Employer Identification number						
	Address			Do not include Social Security num				
	(Nun	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed				
28	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial							
		institutions, creditors, or other parties.						
		No						
		Yes. Fill in the details below.						
	Nar		Date Issued					
		dress nber, Street, City, State and ZIP Code)						
Par	t 12:	Sign Below						
l ha	vo ro	ad the answers on this Statement	nt of Financial Affairs and any attachments, an	d I declare under penalty of periury	that the answers			
are	true a	and correct. I understand that make	aking a false statement, concealing property, o	or obtaining money or property by f				
		inkruptcy case can result in fines in . §§ 152, 1341, 1519, and 3571.	s up to \$250,000, or imprisonment for up to 20	years, or both.				
lel	Kath	nleen Susann Zyrkowski						
		en Susann Zyrkowski	Signature of Debtor 2					
Sig	natu	re of Debtor 1						
Dat	e F	February 8, 2016	Date					
	-	attach additional pages to Your St	Statement of Financial Affairs for Individuals F	iling for Bankruptcy (Official Form	107)?			
ΠY								
_		pay or agree to pay someone who	o is not an attorney to help you fill out bankru	ptcy forms?				
		Jame of Person Attach the F	Bankruptcy Petition Preparer's Notice, Declaration	on, and Signature (Official Form 110)				
			Statement of Financial Affairs for Individuals Filing f		page			

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Debtor 1 Kathleen Susann Zyrkowski Case number (if known)

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
  - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
  - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$800.00 toward the flat fee, leaving a balance due of \$3,200.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$333.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: <b>February 8, 2016</b>	
Signed:	
/s/ Kathleen Susann Zyrkowski	/s/ Joseph M. Olstein
Kathleen Susann Zyrkowski	Joseph M. Olstein
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amounts are	blank.  Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Northern District of Illinois

In re	Kathleen Susann Zyrkowski		Case No.			
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DE	BTOR(S)		
cc	rrsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(by preparation paid to me within one year before the filing prendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services render	red or to	
	For legal services, I have agreed to accept		\$	4,000.00		
	Prior to the filing of this statement I have received		\$	800.00		
	Balance Due		\$	3,200.00		
2. Th	ne source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. Tl	ne source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
<b>4</b> . ■	I have not agreed to share the above-disclosed comper	nsation with any other person	unless they are memb	pers and associates of my	law firm.	
	I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				irm. A	
5. Ir	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b. c. d.	Analysis of the debtor's financial situation, and renderi Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors Representation of the debtor in adversary proceedings [Other provisions as needed]	ment of affairs and plan which s and confirmation hearing, an	may be required; and any adjourned hea		cy;	
6. B <sub>2</sub>	y agreement with the debtor(s), the above-disclosed fee of	loes not include the following	service:			
		CERTIFICATION				
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	presentation of the debto	r(s) in	
Fe	bruary 8, 2016	/s/ Joseph M. Ols	tein			
Da		Joseph M. Olsteir	n			
		Signature of Attorne Olstein Law LLC	У			
		10450 S. Western				
		Chicago, IL 60643 312-725-4132 Fa				
		Joseph@olsteinla				
		Name of law firm				

# **United States Bankruptcy Court Northern District of Illinois**

		1 (of the District of Immors		
In re	Kathleen Susann Zyrkowski		Case No.	
	-	Debtor(s)	Chapter	13
	***		A TODAY	
	VE	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	1
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of credit	ors is true and	correct to the best of my
Date:	February 8, 2016	/s/ Kathleen Susann Zyrkows Kathleen Susann Zyrkowski	ki	

Advocate Christ Medical Center PO Box 3039
Oak Brook, IL 60522-3039

Advocate Medical Group 8550 W. Bryn Mawr Ave. 8th Floor Chicago, IL 60631

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Chase Mtg Po Box 24696 Columbus, OH 43224

Client Services 3451 Harry S. Truman Blvd Saint Charles, MO 63301-4047

Consultants in Lab Medicine PO Box 5981 Carol Stream, IL 60197-5981

Evergreen Orthopedic, S.C. 2800 W 87th Chicago, IL 60652-3831

Falls Collection Svc Po Box 668 Germantown, WI 53022

Illinois Department of Revenue PO Box 54338 Chicago, IL 60664-0338

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

LCMH-Affiliated Services 2800 W 87th Street Chicago, IL 60652-3831

LCMH-Affiliated Services 2800 W. 87th Street Chicago, IL 60652

Little Company of Mary 2800 West 95th Street Evergreen Park, IL 60805

Marquette National Ban 6316 S Western Ave Chicago, IL 60636

Merchant Credit Guide 223 W. Jackson Blvd #700 Chicago, IL 60606

Midwest Anesthesiologists 3407 Momentum Place Chicago, IL 60689-5334

Southwest Orthopedics, S.C. 9618 Southwest Highway Oak Lawn, IL 60453-2862

Stanley Polit 2800 W. 87th St. Chicago, IL 60652

Thera Tech Equipment PO Box 72180 Roselle, IL 60172